



## Early Journal Content on JSTOR, Free to Anyone in the World

This article is one of nearly 500,000 scholarly works digitized and made freely available to everyone in the world by JSTOR.

Known as the Early Journal Content, this set of works include research articles, news, letters, and other writings published in more than 200 of the oldest leading academic journals. The works date from the mid-seventeenth to the early twentieth centuries.

We encourage people to read and share the Early Journal Content openly and to tell others that this resource exists. People may post this content online or redistribute in any way for non-commercial purposes.

Read more about Early Journal Content at <http://about.jstor.org/participate-jstor/individuals/early-journal-content>.

JSTOR is a digital library of academic journals, books, and primary source objects. JSTOR helps people discover, use, and build upon a wide range of content through a powerful research and teaching platform, and preserves this content for future generations. JSTOR is part of ITHAKA, a not-for-profit organization that also includes Ithaka S+R and Portico. For more information about JSTOR, please contact [support@jstor.org](mailto:support@jstor.org).

# PUBLIC HEALTH REPORTS

VOL. 35

MAY 14, 1920.

No. 20

## BIRTH STATISTICS AND INFANT MORTALITY.

### PRELIMINARY REPORT OF THE BUREAU OF THE CENSUS FOR 1918.

In the birth registration area of the United States 1,363,649 infants were born alive in 1918, representing a birth rate of 24.4 per 1,000 population. Of this total number of infants born alive, 1,288,711 were white, and 74,938 were colored. The total number of deaths in the same area was 1,014,620, or 18.2 per thousand. The births exceeded the deaths by 34.4 per cent. For every State in the registration area, for most of the cities, and for nearly all the counties, the births exceeded the deaths in many cases by considerable proportions. The mortality rate for infants under 1 year of age averaged 101 per 1,000 live births. The foregoing are among the facts brought out by the annual compilation of birth statistics by the Bureau of the Census.

The birth-registration area, established in 1915, has grown rapidly. It comprised in 1918, as in 1917, the six New England States, Indiana, Kansas, Kentucky, Maryland, Michigan, Minnesota, New York, North Carolina, Ohio, Pennsylvania, Utah, Virginia, Washington, Wisconsin, and the District of Columbia, and had an estimated population of 55,813,339, or about 53 per cent of the estimated total population of the United States in that year.

#### Comparison With 1917.

The birth rate for the entire birth-registration area fell below that for 1917 by two-tenths of 1 per 1,000 population; but the death rate was greater by 4.1 per 1,000 than in 1917. Thus the excess of the birth rate over the death rate for 1918, which amounted to 6.2 per 1,000, was somewhat less than the corresponding excess for 1917, 10.5.

#### Infant Mortality.

The infant mortality rate—that is, the number of deaths of infants under 1 year of age per 1,000 born alive—throughout the birth-registration area as a whole was 101 in 1918 as against 94 in 1917. This is equivalent to saying that in 1917 of every 11 infants born

alive 1 died before reaching the age of 1 year, whereas the ratio in 1918 was about 1 in 10. Among the 20 States these rates ranged from 64 for Utah to 140 for Maryland, and for the white population separately the lowest and the highest rates were 63 for Utah and 126 for Pennsylvania.

The infant mortality rates vary greatly for the two sexes and for the various nationalities. The rate for male infants in 1918, 111 per 1,000 live births, was nearly 23 per cent greater than that for female infants, which was only 90.4. When the comparison is made on the basis of race or nationality of mother a minimum of 71.4 is shown for the infants with mothers born in Denmark, Norway, and Sweden, and a maximum of 172.4 per 1,000 births for infants with mothers born in Poland, while for Negro children the rate was 163.

#### **Plural Births.**

The reports from the registration area show the birth of 15,342 pairs of twins and 147 sets of triplets in 1918—in all, 30,123 live births, or a little more than 2 per cent of the total number born.

#### **Number of Children Per Family.**

The reports for 1,252,552 of the births occurring in 1918 contained information as to number of child in order of birth. Of these reports, 345,027 were for the first child born to the mother, 264,964 for the second child, 192,339 for the third, 136,366 for the fourth, and 95,963 for the fifth. In the remaining 217,893 cases, or 17.4 per cent of the entire number for which information on this point was obtained, the total number of children borne by the mother was 6 or more; in 38,343 cases it was 10 or more; in 1,820 cases, 15 or more; and in 58 cases, 20 or more. The total number of children ever born to the mothers of these 1,252,552 babies of 1918 was 4,109,309, or 3.3 per family. The reports for 1,189,682 mothers of 1918 contained information as to the entire number of children now living, and gave a total of 3,461,110, or an average of 2.9 living children in each family.

#### **States and Cities.**

The following table shows for the birth registration area, by States and cities of 100,000 population in 1910, the number of births and the infant mortality rate. The figures for the white and colored population are shown separately for those areas in which colored persons constituted more than one-tenth of the total population.

*Births and infant mortality, 1918.*

Area.	Number of births.	Deaths of infants under 1 year of age per 1,000 live births.
Registration area, total.....	1,363,649	101
White.....	1,288,711	97
Colored.....	74,938	161
<i>States.</i>		
Connecticut.....	36,971	107
Indiana.....	64,385	87
Kansas.....	39,117	80
Kentucky.....	62,338	93
White.....	58,373	87
Colored.....	3,965	191
Maine.....	16,798	101
Maryland.....	34,113	140
White.....	27,960	124
Colored.....	6,153	215
Massachusetts.....	95,640	113
Michigan.....	91,011	89
Minnesota.....	55,941	71
New Hampshire.....	9,642	113
New York.....	242,155	97
North Carolina.....	75,525	102
White.....	52,143	85
Colored.....	23,382	140
Ohio.....	124,586	94
Pennsylvania.....	220,170	129
Rhode Island.....	15,499	126
Utah.....	14,478	64
Vermont.....	7,507	93
Virginia.....	63,062	103
White.....	43,637	86
Colored.....	19,425	141
Washington.....	25,682	69
Wisconsin.....	60,867	79
<i>Cities.</i>		
Connecticut:		
Bridgeport.....	4,910	100
New Haven.....	4,869	90
District of Columbia:		
Washington, total.....	8,162	112
White.....	6,021	85
Colored.....	2,141	188
Indiana:		
Indianapolis.....	6,196	93
Kentucky:		
Louisville.....	4,368	112
White.....	3,898	96
Colored.....	470	251
Maryland:		
Baltimore.....	15,143	149
White.....	12,819	137
Colored.....	2,324	215
Massachusetts:		
Boston.....	20,062	115
Cambridge.....	2,672	107
Fall River.....	3,646	180
Lowell.....	3,286	159
Worcester.....	5,238	97
Michigan:		
Detroit.....	27,036	100
Grand Rapids.....	2,536	86
Minnesota:		
Minneapolis.....	8,704	73
St. Paul.....	5,155	87
New York:		
Albany.....	2,153	115
Buffalo.....	13,989	121
New York.....	137,649	92
Rochester.....	6,855	92
Syracuse.....	4,352	119

*Births and infant mortality, 1918—Continued.*

Area.	Number of births.	Deaths of infants under 1 year of age per 1,000 live births.
<b>Ohio:</b>		
<i>Cities—Continued.</i>		
Cincinnati.....	7,913	104
Cleveland.....	20,699	98
Columbus.....	4,464	101
Dayton.....	3,282	87
Toledo.....	5,524	94
<b>Pennsylvania:</b>		
Philadelphia.....	43,408	124
Pittsburgh.....	15,875	139
Scranton.....	3,139	141
<b>Rhode Island:</b>		
Providence.....	6,384	123
<b>Virginia:</b>		
Richmond.....	3,340	147
White.....	2,625	105
Colored.....	1,215	236
<b>Washington:</b>		
Seattle.....	5,910	61
Spokane.....	2,194	77
<b>Wisconsin:</b>		
Milwaukee.....	11,090	106

### EDUCATIONAL WORK IN UNITED STATES PUBLIC HEALTH SERVICE HOSPITALS FOR TUBERCULOUS EX-SOLDIERS.

When the question of the after-care of the tuberculous ex-soldiers in relation to their vocational training was first discussed, it was the opinion of the advisory committee from the National Tuberculosis Association that the Federal Board for Vocational Education should station at the sanatoria of the Public Health Service qualified teachers who would give appropriate work that could be conducted under medical supervision and which would lead to valid choices of occupations and provide training leading thereto.

Several of the Army hospitals which have been turned over to the Public Health Service are being made over into sanatoria for tuberculous ex-soldiers, and occupational therapy, embracing mental work and manual handicraft for curative and diversional purposes, has been instituted in these places as an exclusive activity of the Public Health Service, which will lead to vocational training under the Federal Board for Vocational Education, when the physical and mental condition of the patient will permit of such training. The chief of the vocational education division of the Federal Board for Vocational Education has appointed a committee under the superintendent of training to represent the board in working out cooperative plans for the development of educational work at the Public Health Service sanatoria or at sanatoria where the Bureau of War Risk Insurance is boarding patients.